REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

OCT 25 5 45 PM '00
HAND DELIVERED

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Young Elephants PAC

ADDRESS (number and street) ☐ Check if different than previously reported
PO Box 2708

CITY, STATE and ZIP CODE
Washington, DC 20013

2. FEC IDENTIFICATION NUMBER
C00335971

3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☒ 12-Day Pre-Election Report for the General (Type of Election) election on Nov. 7 in the State of DC

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/1/00 through 10/18/00		$ 1867.31
6. (a) Cash on Hand January 1, ~~19~~ 2000		
(b) Cash on Hand at Beginning of Reporting Period	$ 10,093.05	
(c) Total Receipts (from Line 19)	$ 8030	$ 45273.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 18,123.05	$ 47,140.81
7. Total Disbursements (from Line 30)	$ 7559.00	$ 36,576.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 10,564.05	$ 10,564.05
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
James D. Cox

Signature of Treasurer
James D. Cox

Date
10/24/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

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DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD FROM	TO:	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1,000.00	6885.00	11(a)(i)
ii. Unitemized	30.00	31,388.50	11(a)(ii)
iii. Total (add i and ii) ➤	1,030.00	38,273.50	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	7,000.00	7,000.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	8030.00	45,273.50	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	8030	45,273	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤			20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	59.00	28,926.76	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	59.00	28,926.76	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	7,500	7,650	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	7559.00	36,576.76	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER (11a)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. James P. Cox, 5741 Harwich Ct, Apt. 121, Alexandria, VA 22311 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: eContribution.com; Occupation: Sr. Acct. MGR; Aggregate Year-to-Date > $	10/17/00	1,000.00
B. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) 1,000.00

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code BAMPAC 2929 P Street, NW Suite 202 Washington, DC 20036	Name of Employer	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period 2,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
B. Full Name, Mailing Address and ZIP Code New Republican Majority Fund 201 N. Union St Suite 530 Alexandria, VA 22314	Name of Employer	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) 7,000

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 2
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code Mike Ferguson For Congress 6 Broken Arrow Rd Warren, NJ 07059	Purpose of Disbursement Mike Ferguson (R-NJ-07) US House, 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/10/00	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Rogers For Congress PO Box 581 Brighton, MI 48116	Purpose of Disbursement Mike Rogers (R-MI-08) US House, 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/11/00	Amount of Each Disbursement This Period $500.00
C. Full Name, Mailing Address and ZIP Code Friends of Dylan Glenn PO Box 128 Cusseta, GA 31805	Purpose of Disbursement Dylan Glenn (R-GA-02) US House, 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/12/00	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Abraham Senate 2000 26555 EVERGREEN Road Suite 1220 SOUTHFIELD, MI 48076	Purpose of Disbursement Spencer Abraham (R-MI) US Senate, 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/12/00	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Putnam For Congress PO Box 2426 Bartow, FL 33831	Purpose of Disbursement ADAM PUTNAM (R-FL-12) US House, 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/13/00	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code Hutchison For Congress PO Box 1147 ALAMO, CA 94507	Purpose of Disbursement CLAUDE HUTCHISON (R-CA-10) US HOUSE, 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/13/00	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code Johnson For Congress 2000 PO Box 5190 Bay Shore, NY 11706	Purpose of Disbursement Jean Johnson (R-NY-02) US House, 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/17/00	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code Friends of Clay Shaw 2600 NE 14th ST CAUSEWAY Pompano Bch, FL 33062	Purpose of Disbursement Clay Shaw (R-FL-22) US House 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/17/00	Amount of Each Disbursement This Period 500.00
I. Full Name, Mailing Address and ZIP Code CARROLL FOR Congress 2117 University Blvd, South Jacksonville, FL 32216	Purpose of Disbursement Jennifer Carroll (R-FL-03) US House, 2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10/18/00	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 2
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code Carroll For Congress 2117 University Blvd South Jacksonville, FL 32216	Purpose of Disbursement Jennifer Carroll (R-FL-03) US House, 2000 Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 10/18/00	Amount of Each Disbursement This Period 500.00
B. Full Name, Mailing Address and ZIP Code Tiberi 2000 211 South 5th St. Columbus, OH 43215	Purpose of Disbursement Pat Tiberi (R-OH-12) US House, 2000 Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 10/18/00	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	

FE0AN090

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

[X]	Hand Delivered	Date of Receipt 10/25/00
[ ]	First Class Mail	POSTMARKED
[ ]	Registered/Certified Mail	POSTMARKED (R/C)
[ ]	No Postmark	
[ ]	Postmark Illegible	
[ ]	Received from the House office of Records and Registration	Date of Receipt
[ ]	Received from the Senate Office of Public Records	Date of Receipt
[ ]	Other (Specify):	Postmarked _____ and/or Date of Receipt
[ ]	Electronic Filing	

CR — PREPARER

10/26/00 — DATE PREPARED

(6/2000)